

ATTACHMENT A-  
FULL PERSONNEL STATEMENT

Please read each item in its entirety and respond appropriately. Unless otherwise indicated, reference to any other application or statement is inappropriate.

1. Full Name: \_\_\_\_\_

Maiden Name, if any: \_\_\_\_\_

2. Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

3. Home Telephone Number: \_\_\_\_\_

4. Social Security Number: \_\_\_\_\_

5. Name of business for which this application is made:

\_\_\_\_\_

6. Telephone Number of business for which this application is made:

\_\_\_\_\_

7. Indicate your employment position in this business (owner, co-owner, manager, or specific employee position): \_\_\_\_\_

8. Do you hold an ownership interest of 2.5% or greater in this business?

Yes \_\_\_\_\_ No \_\_\_\_\_

If so, state the amount and type of that interest and the amount thereof:

\_\_\_\_\_

10. Height \_\_\_\_\_ Weight \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Race \_\_\_\_\_ Color of hair \_\_\_\_\_ Color of Eyes \_\_\_\_\_

11. Within the ten (10) years immediately preceding the date of the signing of this application, have you been convicted of a felony, or any violation of the laws of this state, any other state or of the United States relating to the sale of alcoholic beverages?    ☐ Yes    ☐ No

If yes, explain: \_\_\_\_\_

12. Are you an elected or appointed officer, agent or employee of Fayette County?  
     ☐ Yes    ☐ No

If yes, explain: \_\_\_\_\_

**Attach a color copy of your valid driver's license or a photo taken by the Fayette County Marshal's Office.**

Attach Photograph/Snapshot Here

NOTE: Before signing this statement, check all answers and explanations to see that you have answered all questions fully and correctly. This statement is to be executed under oath and subject to the penalties of false swearing, and it includes all attached sheets submitted herewith.

### VERIFICATION

STATE OF GEORGIA

\_\_\_\_\_ COUNTY

I, \_\_\_\_\_, do solemnly swear, subject to the penalties for  
NAME OF APPLICANT (PRINT)

false swearing, that the statements and answers made by me as the applicant in the foregoing personnel statement are true, correct, based upon my personal knowledge, and no false or fraudulent statement or answer is made herein.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature  
(full name and in ink)

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(AFFIX SEAL)

\_\_\_\_\_  
NOTARY PUBLIC

My commission expires: \_\_\_\_\_